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The Outputs menu provides the capability to produce a variety of reports and letters pertinent to Scheduling procedures. The following is a brief description of the options in the Outputs Menu.

#### APPOINTMENT LIST

This option is used to generate appointment lists for one/many/all clinics for a specified date.

#### APPOINTMENT MANAGEMENT REPORT

This option is used to print appointment lists that will help the site implement and manage the new appointment check in requirement.

# CLINIC ASSIGNMENT LISTING

This option is used to monitor the size and composition of clinics. Over time, the listings can reflect clinic growth, shrinkage, etc.

# CLINIC LIST (DAY OF WEEK)

This option is used to generate a listing of all active clinics showing which days they meet and, if applicable, the days they will meet in the future.

#### CLINIC NEXT AVAILABLE APPT. MONITORING REPORT

This option provides an appointment monitoring tool which reflects the data collected for the access performance measure.

#### **CLINIC PROFILE**

This option is used to produce a profile of one/many/all clinics.

#### DISPLAY CLINIC AVAILABILITY REPORT

This option is used to provide a display of the clinic patterns for the clinics and date range selected. For each selected clinic, the option will print its clinic appointment pattern as well as a listing by appointment date/time of those patients who are scheduled.

#### ENROLLMENTS > X DAYS

This option is used to produce a report showing all enrollments for a selected clinic which exceed a select number of days.

#### FILE ROOM LIST

This option is used to generate a list of appointments for a specified day.

#### FUTURE APPOINTMENTS FOR INPATIENTS

This option is used to produce a report that lists all patients admitted on a particular date that have pending appointments at the facility.

#### INPATIENT APPOINTMENT LIST

This option is used to produce a list of inpatients who have appointments scheduled for the facility's clinics.

### MANAGEMENT REPORT FOR AMBULATORY PROCEDURES

This option is used to print a statistical report of ambulatory procedures captured through the CPT coding of outpatient visits for a specified date range.

#### **NO-SHOW REPORT**

This option is used to generate a report of all no-shows entered into the system for specified clinics.

#### PATIENT PROFILE MAS

This option is used to generate a profile for a selected patient including demographic, clinic, eligibility and Means Test information.

#### **PCMM REPORTS**

#### **DETAILED PATIENT ASSIGNMENTS**

This option generates a report which lists patients assigned to selected teams and selected clinics. The report may be used prior to team/position assignments in order to help validate clinic enrollments.

#### HISTORICAL ASSIGNMENT REPORTS

#### HISTORICAL PATIENT ASSIGNMENT DETAIL

This option is used for printing all provider, position, and team assignments that exist for a patient during a specified date range.

#### HISTORICAL PROVIDER POSITION ASSIGNMENT LISTING

This option is used for printing provider position assignments that exist during a specified date range.

#### HISTORICAL PATIENT POSITION ASSIGNMENT LISTING

This option is used for printing patient position assignments that exist during a specified date range.

#### HISTORICAL TEAM ASSIGNMENT SUMMARY

This option is used for printing counts of team and team position assignments and unique patients within a specified date range.

#### PCMM INCONSISTENCY REPORT

This option is used to print the inconsistencies that may exist as a result of the new business rules that were established in Phase II of PCMM.

#### INDIVIDUAL TEAM PROFILE

This option generates a report which displays basic team definition information for selected teams.

# PATIENT LISTING FOR TEAM ASSIGNMENTS

This option generates a report which lists patients assigned to the selected teams.

### PRACTITIONER DEMOGRAPHICS

This option generates a report which displays information for an individual practitioner.

#### PRACTITIONER'S PATIENTS

This option generates a report which displays information pertaining to the number of patients and names of patients assigned to selected practitioners on selected teams.

#### SUMMARY LISTING OF TEAMS

This option generates a report which displays the number of patients assigned to each practitioner currently assigned to the selected team who is in a position that has one of the selected roles.

#### TEAM MEMBER LISTING

This option generates a report which displays information on selected teams and their members.

#### TEAM PATIENT LISTING

This option generates a report which displays information on selected teams and their patients.

#### PRINT SCHEDULING LETTERS

This option is used to print any one of the following types of scheduling letters for a selected date range: Appointment Cancelled, Clinic Cancelled, No-Show or Pre-Appointment.

#### PROVIDER/DIAGNOSIS REPORT

This option is used to print a report of outpatient encounters for a selected date range sorting by Division and Outpatient Encounter Date. You also may choose two of the following additional sorts: Provider, Diagnosis, Patient, Clinic, or Stop Code.

### RADIOLOGY PULL LIST

This option is used to generate a listing of all patients whose radiology reports/films are required for their scheduled appointments.

#### **ROUTING SLIPS**

This option is used to produce routing slips for one individual patient, all patients, or add-ons (patients scheduled for appointments since routing slips were last printed).

#### VISIT RPT BY TRANSMITTED OPT ENCOUNTER

This option is used to generate a report providing encounter and visit information for a specified date range.

#### WORKLOAD REPORT

This option is used to generate a variety of reports showing clinic workload. These help in determining the kinds of activity within clinics during a specified date range.

# **Appointment List**

The Appointment List option is used to generate appointment lists for one/many/all clinic(s) for a specified date. At multidivisional facilities, one/many/all divisions may be specified. You may include only "count" clinics, "non-count" clinics, or both. All clinics chosen have to be associated with one of the selected divisions. Primary care assignment information may be included in the output if so desired.

You may specify the number of desired copies of the list. A separate list is produced for each designated clinic and appointments are listed chronologically by appointment time within each list.

The appointment list generated will include the name and date of the clinic, the run date, appointment time, patient name, and SSN. If applicable, the following data will also be provided: lab, x-ray, and EKG test times, ward location, room/bed, and other patient-specific information. This may include patient being seen as a collateral, patient is enrolled over a year and is a non-vet or NSC, chart requested and current Means Test status and date of the last test, or if there is an entry in the MEANS TEST file. If a NSC patient has been enrolled for more than one year, a message will print to that effect asking that the patient be re-evaluated. Overbooks will be denoted by an asterisk (\*) beside the patient name. A variety of messages, such as those regarding Means Test status and Copay Exemption status, are displayed when applicable.

If you are utilizing a device with barcode capabilities, you may choose to have the patient's SSN printed in barcode form. If wands are available at clinic locations, these barcodes may be used for patient check in and checkout.

A variety of messages, such as those regarding Means Test status, Copay Exemption status, and GAF Score are displayed when applicable.

# **Appointment Management Report**

The Appointment Management Report option is used to print lists that will help your site implement and manage the appointment check in requirement.

You are first prompted for the date range you wish the report to cover. The date range must begin on 10/1/92 or later and end no later than the current date.

The statistics criteria you may choose includes "Statistics" or "Division(s) Only Statistics". The report format selections include "Appointment Clinic" or "Stop Code".

If "Statistics" is selected, you may then select one/many/all divisions and one/many/all clinics, or one/many all stop codes. A page will print for each division selected as well as a totals page for the medical center. If "Division(s) Only Statistics" is selected, you may print data for one/many/all divisions but individual clinics/stop codes cannot be chosen. The data provided will be for all clinics/stop codes in the selected division(s). It should be noted that non-count clinics will be excluded.

After you have set the specifications for the report, you will be given an opportunity to edit your selections, if needed.

All reports should be queued to a printer at 132 columns. Once the output has been queued, it will be assigned an internal task number. This is the number you would use to identify the task to IRM service should problems occur.

# **Clinic Assignment Listing**

The Clinic Assignment Listing option is used to monitor the size and composition of clinics. It is designed to be used as a management tool. Over time, the listings can reflect clinic growth, shrinkage, etc.

The listing may be sorted by clinic or stop code. You may choose all clinics/stop codes or an individual clinic/stop code. You may request only actively enrolled patients be included (those with future appointments) or you may include those patients plus those with no future appointments. Patient specific information is provided including name, SSN, status, eligibility code, # of days enrolled, date of last visit, date of next appointment, and age. Eligibility code totals and Means Test totals are also displayed.

Depending on the user selections, this report could be quite lengthy. You may wish to run it during off hours. This report should be printed at a 132 column margin width.

# **Clinic List (Day of Week)**

The Clinic List (Day of Week) option is used to generate a listing of all clinics showing which days they meet and, if applicable, the days they will meet in the future. All active clinics will be included and will be listed in alphabetical order. At multidivisional facilities, you may choose the division for which to print the clinic list.

The running time for this report will be proportional to the number of clinics at your facility.

# **Clinic Next Available Appt. Monitoring Report**

The Clinic Next Available Appt. Monitoring Report option has been provided as part of the functionality to extract data from each facility showing the waiting time in days for each clinic assigned specific stop codes. The report reflects the actual data (not an average) as of the date/time it is run.

The clinics which appear on the report may be selected by division, clinic, or stop code.

The following is an explanation of the columns found on the report.

WAIT IN DAYS - This is the number of calendar days until the first available appointment and does not count the date the report is run.

SLOTS PER OPEN DAY - This is the number of slots (booked and not booked) found on the date the report is run.

APPTS PER OPEN DAY - This is the number of appointments (booked) found on the date the report is run.

SLOTS TO FIRST AVAIL APPT - This is a count of the number of slots (booked and not booked) until the first available appointment.

APPTS TO FIRST AVAIL APPT - This is the number of slots (booked) until the first available (open) slot.

OPEN DAYS TO FIRST APPT - This is the number of clinic days until the first available appointment.

OPEN DAYS - Does the clinic meet on the date the report is run? 1=YES, 0=NO.

OVERBOOK RATE - This is the percentage found when dividing the APPTS TO FIRST AVAIL APPT value by the SLOTS TO FIRST AVAIL APPT value.

#### **Clinic Profile**

The Clinic Profile option is used to produce a profile of one, many or all clinics. At multidivisional facilities, you may choose to generate the profile of clinics associated with one, many or all divisions. The clinics will be profiled as of the date the report is requested, providing the most current information available.

Some of the data elements included in each profile may be: clinic name, abbreviation (if any), telephone number and location of clinic, days clinic meets, start date, increments, hour display begins, appointment length, variable length, max overbooks/day, stop code, credit stop code, non-count clinic, access to clinic prohibited, and max # days for future booking. Checkout parameters including default provider and diagnosis for each clinic are also displayed.

The following is a brief explanation of some of the data elements listed on the report.

#### NON-COUNT CLINIC

If answered YES, clinic will not impact on AMIS statistics.

#### CREDIT STOP CODE

Stop code that will be credited in addition to normal stop code if clinic is so specified.

#### START DATE

Date clinic was initially set up.

#### **INCREMENTS**

Number of slots per hour.

#### **VARIABLE**

Variable length appointments.

#### PROHIBIT ACCESS TO CLINIC

Indicates if the clinic is restricted to privileged users.

If the clinic is temporarily or permanently inactivated, or is scheduled to be inactivated, this information will be displayed in the profile.

# **Display Clinic Availability Report**

The Display Clinic Availability Report option provides a display of the clinic patterns for the clinics and date range selected. You may run it for all clinics and divisions within your facility, or you may specify individual divisions and clinics.

For each selected clinic, the option will print its clinic appointment pattern as well as a listing by appointment date/time of those patients who are scheduled. The SSN and the appointment length will be displayed for each patient.

The clinic appointment pattern shows the number of available slots, scheduled slots, and overbooks. A legend is included in the report which explains the symbols used.

Individual appointments cancelled through the Cancel Appointment option are reincremented accordingly on the appropriate clinic availability pattern and do not appear on the listing of appointments. The clinic availability pattern does not take into account unscheduled visits or no-shows. In order to get a true picture of the actual number of slots for a clinic, you should refer to the listing of patients beneath the clinic availability pattern. Unscheduled patient visits will always be listed. To include no-shows and those patients who were scheduled in time slots for which the clinic availability was cancelled, the user must specify inclusion of no-shows and cancellations. Patients who were cancelled due to cancellation of the entire clinic will be designated by a "\*".

# **Enrollments > X Days**

This option enables you to produce a report showing all enrollments for a selected clinic that exceed a select number of days.

The report provides patient name, SSN, enrollment date, eligibility code, and patient status (OPT or AC). If a patient has pending appointments for the selected clinic, they will also be displayed.

If you are at a multidivisional facility, you will be able to produce this report for the division of your choice.

#### **File Room List**

The File Room List option is used to generate a listing of appointments for a specified day. This listing may be by terminal digit order where all patients with appointments on that day will be consecutively listed, or the listing may be by clinic where a separate page will print out for each clinic.

Information provided includes the clinic name and date, date report printed, patient name and social security number, time of visit, and appointment type.

When a chart has been requested but no appointment is scheduled (such as may be done through the Chart Request option of the Appointment Menu), the appointment time and type will not appear on the file room list.

When printed, each clinic will print on a separate page.

# **Future Appointments for Inpatients**

Through this option, you may produce a report that lists all patients admitted on a particular date that have pending appointments at the facility. The report is sorted alphabetically by patient name and includes the patient ID#, ward, scheduled appointment date/time and clinic.

Using this information, appointments may be kept, cancelled or rescheduled as necessary.

# **Inpatient Appointment List**

This option is used to produce a list of inpatients who have appointments scheduled for the facility's clinics. The listing is printed for a selected date range and may be run for all wards or an individual ward.

The following data items may be provided on the list: patient name, SSN, clinic, appointment date/time, ancillary appointments, specific patient information.

# **Management Report for Ambulatory Procedures**

The Management Report for Ambulatory Procedures option allows you to print a statistical report of ambulatory procedures captured through the CPT coding of outpatient visits for a specified date range. You may print either a brief or expanded report.

The report may be sorted by clinic or service and may be printed for one/many/all clinics/services. Each clinic/service will print on a separate page and contain the following information: the selected date range, date printed, clinic/service name, the number of procedures and stops, the total number of patients, subtotals for male and female patients, and the average patient age. A final summary page of all selected clinics or services will be provided including the number of visits.

If you choose to print an expanded report, a "Summary of Procedures Performed" will be included for each service or clinic. This summary is sorted either by procedure or patient name and may be printed for one/many/all patients or procedures. Some of the data items which may be included in the summary are: the CPT code and brief description of the procedure; CPT modifier with brief description; the patient's name, social security number and age; the date and time the procedure was performed; the number of times the procedure was performed during the selected date range; and subtotals for veteran and non-veteran patients.

At multidivisional facilities, one/many/all divisions may be selected.

The report should be sent to a printer as it was not designed to be displayed on the screen.

# **No-Show Report**

The No-Show Report option generates a report of all no-shows entered into the system for specified clinics. The report can be run for one, many or all clinics. A range of clinics may also be selected, such as all clinics whose names begin with the same letters. This will limit the number of keystrokes needed to choose those clinics. The output can be generated for a date range or a single date. At multi-divisional facilities, you may print the report for a single division or all divisions.

The output is divided into two sections for each selected clinic with each section printing on a separate page. The first section lists the date of the clinic, the time of the no-show appointment, the patient's name and social security number, the clerk's name who entered the no-show, and the date/time rebooked if applicable. The second section lists the date of the clinic, the total number of no-shows, a breakdown of that total into rebooked/not rebooked appointments, and the percentage of the appointments that were no-shows for the selected clinic during that time period. Lastly, a totals page is produced. This provides the same information found in the second section of the individual clinic reports except for ALL the selected clinics combined. The date and time run, page number, dates report covers, and appropriate division/clinic name appear on the top of each page of the individual clinic outputs.

Appointments with a status of NO ACTION TAKEN are included in this report. For appointments with this status, NONE - NO ACTION TAKEN will be displayed for CLERK. These appointments will also be included in the TOTAL NO-SHOWS W/NO REBOOK APPTS column of the totals page that prints at the end of each section of the report.

A table of contents is provided with this report if sent to a printer. Due to the processing sequence, this table prints at the end of the output. You may wish to insert this page at the beginning of the report.

When generated, each clinic will print on a separate page.

#### **Patient Profile MAS**

The Patient Profile MAS option is used to generate a complete profile for a patient or a profile for a specified date range. Information which may be accessed includes demographic, appointments, add/edits, dispositions, enrollments, means test, and team information.

You may utilize either the roll and scroll format or the List Manager format while using this option. The same information is available through both formats. To choose the List Manager format, answer NO at the "Do you want to print the profile?" prompt. The following are the available actions which may be selected.

#### **DISPLAY INFO**

Allows you to display selected information to the screen.

#### PRINT PROFILE

Allows you to print selected information to a specified device.

#### **CHANGE PATIENT**

Allows you to enter another patient without exiting the option.

#### CHANGE DATE RANGE

Allows you to select another date range for the same patient without exiting the option.

#### **TEAM INFORMATION**

Allows you to display information for all teams to which the selected patient is assigned.

# PCMM Reports Detailed Patient Assignments

This option generates a report which lists patients assigned to selected teams and selected clinics. The report can be printed for those patients who are assigned to the team for primary care (assigned) or for those patients who are assigned to the team for something other than primary care (unassigned). The report may be used prior to team/position assignments in order to help validate clinic enrollments.

When selecting teams and clinics, you may enter A for ALL (uppercase), or you may select individual teams and clinics (maximum of 20 each). The report requires 132 column output.

# PCMM Reports Historical Assignment Reports Historical Patient Assignment Detail

This option is used for printing all provider, position, and team assignments that exist for a selected patient during a specified date range.

The patient's current primary care provider and team may be displayed before the date range selection prompts.

# PCMM Reports Historical Assignment Reports Historical Provider Position Assignment Listing

This option is used for printing provider position assignments that exist during a specified date range for selected divisions, teams, positions, providers, and enrolled clinics. Sort criteria includes type of assignments, summary or detail report, and output sort order.

The summary report includes primary care (yes/no), maximum patients allowed, assigned patients (pc and non-pc), open slots, and precepted patients (pc and non-pc). The detail report includes the summary report plus provider name, position, and associated clinic.

The report requires 132 column output.

# PCMM Reports Historical Assignment Reports Historical Patient Position Assignment Listing

This option is used for printing patient position assignments that exist during a specified date range for selected divisions, teams, positions, providers, and enrolled clinics. Sort criteria includes type of assignments, summary or detail report, and output sort order. The summary report includes category, count, and percent. The detail report includes the summary report plus patient name, patient ID, primary eligibility, Means Test category, team, provider, team position, enrolled clinic, activation and inactivation date.

The report requires 132 column output.

# PCMM Reports Historical Assignment Reports Historical Team Assignment Summary

This option is used for printing counts of team and team position assignments and unique patients within a specified date range. If there are any team assignments without active position assignments, these patients will be listed out separately.

The report requires a 132 column output.

# PCMM Reports PCMM Inconsistency Report

This option is used to print the inconsistencies that may exist as a result of the new business rules that were established in Phase II of PCMM. The report may be run for one/many/all teams. You may choose from the following outputs - brief, detailed by patient, or detailed by team.

A list of inconsistency descriptions may be printed along with the steps for correction. Detailed instructions can be found in the PCMM User Guide.

Depending on the sort criteria, the report may take a long time to run. Queueing is recommended.

# PCMM Reports Individual Team Profile

This option generates a report displaying basic team definition information for selected teams. When selecting teams, you may enter A for ALL (uppercase), or you may select individual divisions and teams (maximum of 20 each).

Information provided may include the following: team name and phone number, service/section associated with the team, team purpose, maximum number of patients allowed, unique patients assigned, team description, team positions, standard role associated with the position, provider name, whether or not the position can provide primary care, number of patients allowed and assigned for each position, and associated clinic.

The report requires 132 column output.

# PCMM Reports Patient Listing for Team Assignments

This option generates a listing of patients assigned to selected team(s). When selecting teams, roles, or practitioners, you may enter A for ALL (uppercase), or you may select individual teams, roles, and practitioners (maximum of 20 each). Role and practitioner selections will be limited to those associated with the selected teams.

If you enter NONE for a practitioner, the report lists patients without that kind of assignment (e.g., no Primary Care practitioner). The PCMM software no longer allows this to happen; however, this report can be used to help correct these older problem assignments.

Information provided may include patient name, patient ID, date the patient was assigned to the position, whether or not the position can provide primary care, practitioner name, position, standard role, and preceptor.

The report requires 132 column output.

# PCMM Reports Practitioner Demographics

This option generates a report displaying information for a practitioner(s).

For each team the selected practitioner is assigned to, the following information may be listed: team name, service/section, team position, standard role for that position, user class required to fill that position, room number, phone number, number of patients allowed and assigned that position, preceptor, person class, and the clinic associated with the position.

# PCMM Reports Practitioner's Patients

This option generates a report identifying the size and constituents of a practitioner's patient panel.

When selecting teams, roles, and practitioners, enter A for ALL (uppercase) or select individual teams, roles, and practitioners (maximum of 20 each). Role and practitioner selections will be limited to those associated with the selected teams.

If you answer YES at the "Print Summary Only" prompt, the output will include the following data elements for each practitioner: practitioner name, position, team, and number of patients assigned.

If you answer NO at the "Print Summary Only" prompt, the output will include the data mentioned above plus the following fields for each applicable patient: name, ID, Means Test status, primary eligibility, last appointment, next appointment, and clinic.

If the practitioner has a preceptor, the preceptor will also be listed.

# PCMM Reports Summary Listing of Teams

This option generates a report which displays the number of patients assigned to each practitioner assigned to the team. This provides helpful information to practitioners regarding the size of their patient panels.

When selecting teams and roles, you may enter A for ALL (uppercase), or you may select individual teams and roles (maximum of 20 each). Role selections will be limited to those associated with the selected teams.

The report requires 132 column output.

# PCMM Reports Team Member Listing

This option generates a report displaying information on selected teams and their members. This information may be used to review which practitioners were assigned to a team for a selected date range.

When selecting teams, user classes, and roles, you may enter A for ALL (uppercase), or you may select individual teams, user classes, and roles (maximum of 20 each). User class will be prompted for only if the user class functionality is turned on at your site. Role and user class selections will be limited to those associated with the selected teams.

# PCMM Reports Team Patient Listing

This option generates a report displaying a team's patients and associated clinics.

When selecting teams and roles, you may enter A for ALL (uppercase), or you may select individual teams and roles (maximum of 20 each). Role selections will be limited to those associated with the selected teams.

The report requires 132 column output.

# **Print Scheduling Letters**

This option allows you to print any one of the following types of scheduling letters for a selected date range.

APPOINTMENT CANCELLED CLINIC CANCELLED NO-SHOW PRE-APPOINTMENT

You may choose to print the letter assigned to the clinic (through Set Up a Clinic option) or another letter of the same type. If you choose to print an assigned letter and the selected clinics do not have letters of the corresponding type assigned to them, no letters will print for those clinics. If you choose to print a letter other than the letter assigned to the clinic(s), the letter you select will print for all selected patients and clinics.

For PRE-APPOINTMENT type letters - if ALL is entered at the "Select clinic" prompt, letters will not print for any clinics designated as non-count clinics.

If you wish to print letters for the majority of clinics, enter ALL at the "Select clinic" prompt. You will then be asked if you wish to exclude any clinics and, if so, to name those clinics. This action prevents having to enter numerous individual clinic names.

# **Provider/Diagnosis Report**

This option is used to print a report of outpatient encounters for a selected date range. The Provider/Diagnosis Report sorts by division and outpatient encounter date. You also may choose two of the following additional sorts: provider, diagnosis, patient, clinic, or stop code.

Data contained in the report includes patient name and last four digits of SSN, encounter date and time, clinic name and stop code, provider and diagnostic code. The report is formatted to print at 132 columns. Depending on your sort selections, you may wish to queue to print during non-peak hours.

The totals of this report will vary depending on how the site uses the add/edit stop code functionality. If additional stop codes are added through the AE (add/edit) action of the Appointment Management option, the stop code will be associated with the scheduled appointment's date/time. Depending on sort criteria, these entries may print on the Provider/Diagnosis Report and may/may not be included in the totals.

If additional stop codes are added through the menu option Add/Edit Stop Codes, the entries will have different times than the actual appointment. In this case, these entries will print on this report and be included in the totals. For example, a clerk needs to add/edit a stop code for 108. Using the Add/Edit Stop Codes menu option, the referring clinic is entered as the Associated Clinic. When the Provider/Diagnosis report is generated for that clinic, it will count this stop code as workload.

In order for this report to be accurate, sites need to make the following adjustments.

- Add/edit stop codes only through the use of the AE action of the Appointment Management option.
- When using the Add/Edit Stop Codes option, change the procedure for Associated Clinic.

# **Radiology Pull List**

The Radiology Pull List option is used to generate a listing of all patients whose radiology reports/films are required for their scheduled appointments. The report is run by date and sorted by terminal digit (SSN). The listing includes patient name, SSN, clinic name, and appointment date/time. Any appointments the patient has scheduled for later that same day will also be displayed.

# **Routing Slips**

The Routing Slips option is used to print routing slips for one individual patient, all patients, or add-ons (patients scheduled for appointments since routing slips were last printed).

The routing slips may be sorted to print by terminal digit, patient name or clinic name. When sorted by clinic, one, many (limit 20), or all clinics may be included. If the slip is a reprint of a previous run, the original run date is also shown.

The routing slip shows the patient's rated disabilities and health insurance data, when applicable. Any future appointments are also listed (limited to the number that will fit on one page).

An area is provided to list the diagnoses and procedures performed during the clinic visits on that day and any of the following questions regarding service connection and exposure related conditions are included, when applicable.

Was treatment for SC Condition? \_\_Yes \_\_No
Was treatment related to Agent Orange Exposure? \_\_Yes \_\_No
Was treatment related to Ionizing Radiation Exposure? \_\_Yes \_\_No
Was treatment related to Environmental Contaminant Exposure? \_\_Yes \_\_No

A routing slip may be printed for a single patient even if there are no clinic visits scheduled for that patient on that day.

When all routing slips are printed, a total page will be provided showing the facility name, date and time the slips were printed, and the total number of slips printed.

# **Visit Rpt by Transmitted OPT Encounter**

The Visit Report by Transmitted Outpatient Encounter option provides a report which contains encounter and visit information. The report is divided into two sections. The first displays the transmission status of the encounters to the National Patient Care Data Base (NPCDB) for the selected date range. Statuses include the following.

WAITING waiting to be transmitted

TRANSMITTED transmitted but not acknowledged ACKNOWLEDGED transmitted and acknowledged

The second section consolidates those encounters into total visits. You may select to print either section or both sections.

Encounters are grouped by veteran eligibility and then by category of visit. Compensation and Pension is an appointment type and is included in the Category of Visit totals. This breakout is for information only.

A visit consists of all encounters for a patient for a day. Visits are counted by facility so if a patient has one encounter in one division, and another encounter in a different division, only one visit is counted.

At multi-divisional facilities, you will have the option of printing division and site totals or site total only.

# **Workload Report**

The Workload Report option is used to generate a variety of reports showing clinic workload, facilitating determination of the kinds of activity within clinics during a specified date range. It allows for comparison of clinic or stop code activity for a specified time frame between the selected year and the previous year.

After the user specifies a date range for the report, the system will verify that the outpatient encounter status update process has been performed for each date in the range. If any of the dates have not been processed by this update logic, the user will be warned and generation of the workload report will be allowed to continue. However, the user will be advised to run the report again, after the update process has been completed (Appointment Status Update option, Supervisor Menu), to obtain more accurate workload data.

The user has the ability to sort the report by clinic or stop code and clinic. A brief or expanded report may be selected. A brief report only generates the comparison of selected clinics or stop codes between the selected year and previous year, showing number of visits for each year, net change, and change percentage. The expanded report includes the comparison (if desired) plus a summary of each clinic selected. Number of scheduled appointments, unscheduled appointments, inpatient appointments, and overbooks are some of the data elements displayed.

The user may choose to display the report for individual clinic meetings or a summary of the month. The patient names may/may not be displayed.

If the report is run by stop code, the add/edits may be included. Cancelled appointments will appear on this report if they were entered through either the Cancel Clinic Availability option or the Cancel Appointment option.

All appointments with a status of NO ACTION TAKEN will be included in the NO-SHOWS column of the report.

The total patients seen is calculated as follows.

Scheduled + Unscheduled + Inpatients + Overbooks + Add/Edits = Total Patients Seen

Depending on selected specifications, this report may be quite lengthy. You may choose to run the report during off hours.

When printed, each clinic will appear on a separate page.